



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Hilda E. Smith

Serial No.: 09/767,041

Filed: January 22, 2001

For: STREPTOCOCCUS SUIS VACCINES
AND DIAGNOSTIC TESTS

Confirmation No.: 3344

Examiner: P. Duffy

Group Art Unit: 1645

Attorney Docket No.: 2183-4726US

CERTIFICATE OF MAILING

I hereby certify that this correspondence along with any attachments referred to or identified as being attached or enclosed is being deposited with the United States Postal Service as First Class Mail on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

November 14, 2005
Date


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Leta M. Howard
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SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

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Sir:

In compliance with the duty to disclose information material to patentability pursuant to 37 C.F.R. § 1.56, it is respectfully requested that this Supplemental Information Disclosure Statement be entered and the document listed on attached Form PTO/SB/08 be considered by the Examiner and made of record. A copy of the listed document is enclosed pursuant to 37 C.F.R. § 1.98(a).

Other Documents

Dutch Text Annual Report ID-DLO Streptococcus Suis, 1996, with English translation of said report.

This Supplemental Information Disclosure Statement is filed after the mailing date of the first Office Action on the merits.

The fee pursuant to 37 C.F.R. § 1.17(p) is enclosed.

Respectfully submitted,



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KWP/bv

Enclosures: Form PTO/SB/08
Copy of document cited
Check in the amount of \$180.00

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PTO/SB/08B(10-03)

Approved for use through 7/31/2006. OMB 0651-0031

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

of

Complete if Known

Application Number	09/767,041
Filing Date	January 22, 2001
First Named Inventor	Hilda E. Smith
Group Art Unit	1645
Examiner Name	P. Duffy
Attorney Docket Number	2183-4726US

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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